2. These changes are not specific, but are produced by conditions other than malignant tumors.

3. The changes produced in muscle by invading carcinoma are more marked than those produced by sarcoma, but do not differ essentially in kind. Those produced by sarcoma are chiefly mechanical; those due to carcinoma are mechanical, nutritive, and metabolic. Evidences of toxic action are more marked in the latter than in sarcoma. Carcinoma acts more as an active injurious foreign body upon muscle than does sarcoma.

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## A CASE OF OPHTHALMIA NEONATORUM CAUSED BY THE DIPLOBACILLUS OF MORAX AND AXENFELD.

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THAT the gonococcus is not the only cause of ophthalmia neonatorum is a conceded fact. The diplococcus, the streptococcus, the bacillus coli communis, and the micrococcus aureus also produce purulent conjunctivitis in the newborn. The last statistics of Groenouw show that in one hundred cases of ophthalmia neonatorum the gonococcus was present in only forty-one. All observers agree, however, in the opinion that when the disease is due to the gonococcus it usually assumes a very severe character.

Among the several micro-organisms described in connection with purulent conjunctivitis of the newborn the bacillus of Weeks and the diplobacillus of Morax and Axenfeld have never been mentioned. Having met with an unusual case of ophthalmia neonatorum caused by the last-named bacterium, which as a general rule is only found in cases of subacute catarrhal conjunctivitis, I have deemed it of sufficient interest to report.

*Clinical History.* E. L., female, three days old, child of healthy parents, presented slight œdema of the lids and a small amount of purulent exudate in both eyes, the symptoms being more marked in the right eye. There was no chemosis. The parents asserted that their two other children had shown, shortly after birth, similar symp-

toms, which, in the case of the elder one, were so severe as to threaten the destruction of one eye.

I prescribed protargol in 10 per cent. solution, increasing to 20 per cent. solution, and frequent washings with warm boric-acid solution, with the result that the œdema of the lids rapidly disappeared and the purulent exudate decreased very noticeably. I instructed the mother to continue the protargol instillations, and did not see the child during the following ten days. When called again I found that there was yet some purulent exudate in both eyes, and that the stump of the cord and the left ear were also suppurating. Otherwise the child seemed in perfect health. A much-desired bacteriological examination could not be made at the time. The suppuration of the ear and stump ceased under appropriate treatment, but the ophthalmia was rebellious. Noticing that not even applications of nitrate of silver in 2 per cent. solution had any effect, I made, at the first opportunity, a bacteriological examination of the conjunctival exudate, and found to my surprise a pure culture of the diplobacillus of Morax and Axenfeld. Knowing the almost specific action of zinc salts on this micro-organism, I prescribed sulphate of zinc in a 2.5 per cent. solution, to be instilled once a day. Under this treatment the ophthalmia, which had resisted all medication, got rapidly well. The right eye was cured in eight days, the left one in twenty. The disease had lasted in all nearly three months.

The history of this case will show, I hope, the importance of making an early bacteriological examination in all cases of ophthalmia neonatorum, and demonstrates also the fact that the diplobacillus described by Morax and Axenfeld as the cause of subacute catarrhal conjunctivitis can produce other forms of infectious ophthalmia.

## FORWARD DISLOCATION OF THE HEAD OF THE FIBULA.

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Forward dislocation of the head of the fibula is very rarely met with, and for very simple reasons. First, it is firmly bound in its articulation with the tibia by strong ligaments; and, second, there are no very powerful muscles attached to it anteriorly to either in whole or in part pull it from its place

Hamilton reports four cases observed by Savournin, Jobard, Thompson, and Dr. J. Hawley; while the *American Text-book of Surgery*, edited by Drs. Keen and White, says there have been seven cases of this injury reported.

It seems that while seven cases of forward dislocation have been reported at various times, there have been only five cases reported of backward dislocation of the same joint. This would appear at first thought to be the more common of the two, seeing the biceps femoris